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CONFIRMATION NO. 1022

<b>SERIAL NUMBER</b> 10/765,517	<b>FILING OR 371(c) DATE</b> 01/27/2004 <b>RULE</b>	<b>CLASS</b> 417	<b>GROUP ART UNIT</b> 3746	<b>ATTORNEY DOCKET NO.</b> H0006233-0760 (1100.124410)
<b>APPLICANTS</b> Ulrich Bonne, Hopkins, MN; <b>** CONTINUING DATA *****</b> This application is a CIP of 10/749,863 12/31/2003 <i>PJB</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None PJB</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/11/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>[Signature]</i> Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 54
<b>INDEPENDENT CLAIMS</b> 7				
<b>ADDRESS</b> 000128				
<b>TITLE</b> Micro ion pump				
<b>FILING FEE RECEIVED</b> 1726	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	